



17169 U.S. PTO

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PTO/SB/05 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>	Attorney Docket No.	<b>R0164B-REG</b>
	First Inventor	<b>Dewdney, Nolan James et al.</b>
	Title	<b>Substituted 7-Aza-Quinazoline Compounds Useful as P38 Kinase Inhibitors</b>
	Express Mail Label No.	<b>ER 818 815 025 US</b>

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages <b>38</b>] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R &amp; D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>2</b>]</p> <p>5. Oath or Declaration [Total Sheets <b>2</b>] a. <input checked="" type="checkbox"/> Newly executed (copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p> <p><b>ACCOMPANYING APPLICATIONS PARTS</b></p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>10. <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other: _____</p>

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)  
Prior application information: Examiner \_\_\_\_\_

of prior application No: \_\_\_\_\_ / \_\_\_\_\_  
Art Unit: \_\_\_\_\_

**Claim for Benefit of Provisional Application(s):**

This Application claims the benefit under title 35 U.S.C. 119(e) of U.S. Provisional Application No. 60/463,229, filed April 16, 2003.

**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		<b>24372</b> (Insert Customer No. or Attach bar code label here)		or <input type="checkbox"/> Correspondence address below	
Name	Grant D. Green ROCHE PALO ALTO LLC				
Address	Patent Law Dept., M/S A2-250 3431 Hillview Avenue				
City	Palo Alto	State	CA	Zip Code	94304
Country	U.S.A.	Telephone	650/ 855-5311	Fax	650/ 855-5322

Name (Print/Type)	Grant D. Green	phone	650/ 855-5311	Registration No.	31,259
Signature				Date	April 15, 2004

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. **SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.** Doc. #124178v1

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2004</h2> <p style="font-size: small; margin: 5px 0;">Effective 01/01/2003. Patent fees are subject to annual revision.</p>		<p><b>Complete if Known</b></p>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	<b>New Application</b>
		Filing Date	herewith
		First Named Inventor	<b>Dewdney, Nolan James et al.</b>
		Examiner Name	unassigned
		Art Unit	unassigned
<b>TOTAL AMOUNT OF PAYMENT (\$)</b> 806.00		Attorney Docket No.	<b>R0164B-REG</b>

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																																														
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money <input type="checkbox"/> Other <input type="checkbox"/> None Order <input checked="" type="checkbox"/> Deposit Account: <div style="margin-top: 10px;">                 Deposit Account Number: <span style="border: 1px solid black; padding: 2px 20px;">18-1700</span>                   Deposit Account Name: <span style="border: 1px solid black; padding: 2px 50px;">Roche Palo Alto LLC 3431 Hillview Avenue Palo Alto, CA 94304</span> </div> <p style="font-size: x-small; margin-top: 10px;">The Director is authorized to: (check all that apply)  <input checked="" type="checkbox"/> Charge fee(s) indicated below   <input checked="" type="checkbox"/> Credit any overpayments  <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application  <input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b> to the above-identified deposit account.</p>	<h3>3. ADDITIONAL FEES</h3> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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late filing fee or oath		1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet		1053	130	1053	130	Non-English specification		1812	2,520	1812	2,520	For filing a request for reexamination		1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		1251	110	2251	55	Extension for reply within first month		1252	410	2252	205	Extension for reply within second month		1253	930	2253	465	Extension for reply within third month		1254	1,450	2254	725	Extension for reply within fourth month		1255	1,970	2255	985	Extension for reply within fifth month		1401	320	2401	160	Notice of Appeal		1402	320	2402	160	Filing a brief in support of an appeal		1403	280	2403	140	Request for oral hearing		1451	1,510	1451	1,510	Petition to institute a public use proceeding		1452	110	2452	55	Petition to revive - unavoidable		1453	1,300	2453	650	Petition to revive - unintentional		1501	1,300	2501	650	Utility issue fee (or reissue)		1502	470	2502	235	Design issue fee		1503	630	2503	315	Plant issue fee		1460	130	1460	130	Petitions to the Commissioner		1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)		1806	180	1806	180	Submission of Information Disclosure Stmt		8021	40	8021	40	Recording each patent assignment per property (times number of properties)		1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))		1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))		1801	750	2801	375	Request for Continued Examination (RCE)		1802	900	1802	900	Request for expedited examination of a design application		Other fee (specify) _____						<b>SUBTOTAL (1)</b> (\$ 770)		<b>SUBTOTAL (3)</b> (\$ 0)			
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Total Claims	<span style="border: 1px solid black; padding: 2px 10px;">22</span>	-20 ** =	<span style="border: 1px solid black; padding: 2px 10px;">2</span>	X	<span style="border: 1px solid black; padding: 2px 10px;">18</span>	=	<span style="border: 1px solid black; padding: 2px 10px;">36</span>																																																																																																																																																																																								
Independent Claims	<span style="border: 1px solid black; padding: 2px 10px;">3</span>	-3 ** =	<span style="border: 1px solid black; padding: 2px 10px;">0</span>	X	<span style="border: 1px solid black; padding: 2px 10px;">86</span>	=	<span style="border: 1px solid black; padding: 2px 10px;">0</span>																																																																																																																																																																																								
Multiple Dependent				X	<span style="border: 1px solid black; padding: 2px 10px;"></span>	=	<span style="border: 1px solid black; padding: 2px 10px;">0</span>																																																																																																																																																																																								
Large Entity		Small Entity		Fee Description	Fee Paid																																																																																																																																																																																										
Fee Code	Fee (\$)	Fee Code	Fee (\$)																																																																																																																																																																																												
1202	18			Claims in excess of 20																																																																																																																																																																																											
1201	86			Independent claims in excess of 3																																																																																																																																																																																											
1203	280			Multiple dependent claim, if not paid																																																																																																																																																																																											
1204	84			** Reissue independent claims over original patent																																																																																																																																																																																											
1205	18			** Reissue claims in excess of 20 and over original patent																																																																																																																																																																																											
<b>SUBTOTAL (2)</b>					<b>(\$ 36.00)</b>																																																																																																																																																																																										

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Grant D. Green	Registration No.	31,259
Signature		Telephone	650/ 855-5311
		Date	April 15, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.